

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <u>5614</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>Susan</u> <u>M</u> <u>Washington</u> P.O. Box, Bldg., Room No., if any _____ Street <u>215 Granville Drive</u> City <u>Silver Spring</u> State <u>Maryland</u> ZIP Code + 4 <u>20901</u>	4. Name, file number, and address of labor organization. Name <u>AFL-CIO</u> Labor Organization File Number <u>000-106</u> P.O. Box, Building and Room Number, if any _____ Street <u>815 16th Street, N.W.</u> City <u>Washington</u> State <u>District of Columbia</u> ZIP Code + 4 <u>20006</u>
5. Position in labor organization. <u>Exec Asst to Exec Vice President</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any). Name _____ Trade Name, if any: _____ P.O. Box, Bldg., Room No., if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	7.a. Nature of Interest, Transaction, or Income. _____ 7.b. Amount. _____

### Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed

Susan M Washington

On

08/01/2005

Date

(202) 637-5156

Telephone Number

Name of Person Filing Susan Washington

File Number U-

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Democratic National Committee

Trade Name, if any: Political Organization

P.O. Box, Bldg., Room No., if any

Street 430 S. Capitol Street, S.E.

City Washington

State District of Columbia ZIP Code + 4 20003

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

The AFL-CIO COPE PCC (Voluntary Fund) contributes to the DNC and Linda Chavez-Thompson serves as a Vice Chair of the DNC (an unsalaried position).

## 11.b. Approximate dollar value of such dealing.

\$15,000

## 12.a. Nature of interest held or income received.

2004 Democratic National Convention  
Hotel Room Provided - Sheraton Boston Hotel  
(07/23/05 - 07/30/05) as Exec. Asst. to AFL-CIO  
Exec. Vice President and DNC Vice Chair Linda  
Chavez-Thompson.

Exact cost unknown as bill was charged to DNC Master  
Account.

## 12.b. Amount.

\$1,680

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

## 13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 14.a. Nature of payment.

13.b. Is the Business an Employer ☐ or Consultant ☐ ?

## 14.b. Amount of payment.

Name of Person Filing Susan Washington

File Number U-

## Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

## 8. Name and address of Business (including trade name, if any).

Name Highlander Research and Education Center

Trade Name, if any: Non-profit 501(c)(3)

P.O. Box, Bldg., Room No., if any

Street 1959 Highlander Way

City New Market

State Tennessee ZIP Code + 4 37820

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

## 11.a. Nature of such dealing.

The AFL-CIO contributes to the Highlander Research and Education Center which is a non-profit 501(c)(3) and Susan Washington serves on the Board of Directors on behalf of the AFL-CIO.

## 11.b. Approximate dollar value of such dealing.

\$2,000

## 12.a. Nature of interest held or income received.

Room, Board and Transportation to attend the 2004 Fall Board of Directors Meeting (11/5-7/2004).

Room, Meals and Lodging - \$350  
Ground Transportation in Knoxville - \$50  
Air Transportation from DCA - \$210

## 12.b. Amount.

\$610

Name of Person Filing Susan Washington

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## Part B Continuation Page

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## 8. Name and address of Business (including trade name, if any).

Name Congressional Hispanic Caucus Institute

Trade Name, if any: Non-profit 501(c)(3)

P.O. Box, Bldg., Room No., if any

Street 911 2nd Street, N.E.

City Washington

State District of Columbia ZIP Code + 4 20002

## 9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

## 10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

## 11.a. Nature of such dealing.

The AFL-CIO contributes to the Congressional Hispanic Caucus Institute, a 501(c)(3) affiliated with the Caucus. In addition, AFL-CIO Executive Vice President Linda Chavez-Thompson is a member of the Board of the Congressional Hispanic Caucus Institute.

## 11.b. Approximate dollar value of such dealing.

\$10,000

## 12.a. Nature of interest held or income received.

Susan Washington attended the 2004 CHCI Annual Gala (09/15/04) as a guest of Linda Chavez-Thompson, CHCI Board Member.

## 12.b. Amount.

\$500

Name of Person Filing Susan Washington

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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

Name Union Privilege

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 1717 K Street, N.W., Suite 707

City Washington

State District of Columbia ZIP Code + 4 20036

9. Business deals with:

☒ a. Labor Organization

☐ b. Trust

☐ c. Employer

10. If 9.b. or 9.c. is checked give trust or employer's name.

Name

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street

City

State ZIP Code + 4

11.a. Nature of such dealing.

Union Privilege provides union members and their families with product and consumer benefits.

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

I received a pair of union-made jeans and a polo shirt at no cost.

12.b. Amount.

\$57